

WOOD RIVER PUBLIC LIBRARY FREEDOM OF INFORMATION REQUEST FORM

Requestor's Name (or business, if applicable) \_\_\_\_\_

Date of Request \_\_\_\_\_ Phone Number \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Certification Requested \_\_\_\_\_

Description of Records Requested:

\_\_\_\_\_  
\_\_\_\_\_

**Library Response (Requestor does not fill in below this line)**

APPROVED:

\_\_\_\_ The documents you requested are enclosed.

\_\_\_\_ The documents will be made available upon payment of copying costs \$ \_\_\_\_\_.

\_\_\_\_ You may inspect the records at \_\_\_\_\_ on the date of \_\_\_\_\_.

DENIED:

\_\_\_\_ The request creates an undue burden on the public body in accordance with Section 3(f) of the Freedom of Information Act, and we are unable to negotiate a more reasonable request.

\_\_\_\_ The materials requested are exempt under Section 7 of the Freedom of Information Act for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_

Individual(s) that determined request to be denied: \_\_\_\_\_

\_\_\_\_ Request delayed, for the following reasons (in accordance with 3(d) of the FOIA:

\_\_\_\_\_. You will be notified by the date of \_\_\_\_\_ as to the action taken on your request.

**The information required by this form is MANDATORY in order to comply with 5 ILCS/140/1. Failure to so provide may result in the form not being processed.**

Board President

Date of Reply

\_\_\_\_\_

\_\_\_\_\_